

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

139 576

FILING DATE

12-29-87

APPLICANT(S)

Widder et al.

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		2				
4		2				
5	1					
6		1				
7		2				
8		2				
9	1					
10	1					
11		1				
12			1			
13			2			
14			1			
15			2			
16			1			
17			1			
18			2			
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49						
50						
TOTAL IND.	3		2			
TOTAL DEP.	11	↔	9	↔		
TOTAL CLAIMS	14		11			

*	IND.	DEP.	*	IND.	DEP.	*
51						
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100						
TOTAL IND.						
TOTAL DEP.		↔		↔		↔
TOTAL CLAIMS						